# ARIZONA CORPORATION COMMISSION <u>UTILITIES DIVISION</u>

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-04286A Kacy Parker Arroyo Water Co. HC6 Box 1048 L Payson, AZ 85541 Cochele of

HECEIVED

JUL & B ZUNR

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

# ANNUAL REPORT

FOR YEAR ENDING

12 31 2007

FOR COMMISSION USE

**ANN 04** 

07

SCANNED

PROCESSED BY:

#1768 P.001 /017

LAPCONTRACTING

Z187474826 74:81 8002/Q1/70

#### **COMPANY INFORMATION**

Company Name (Business Name)			
Mailing Address	\$1.6 Box 1048L		
Mailing Address(Street)	#C6 BOX 1048L PAUSON ARIZONA (State)	8554	7
(City)	(State)	(Zip)	•
928 · 474 - 1766 Telephone No. (Include Area Code)	928-474- 78/Z Fax No. (Include Area Code)	Cell No. (Include .	Area Code)
Email Address			· · · · · · · · · · · · · · · · · · ·
Local Office Mailing Address	#16 BOX 1048C		
3	(Street) PAYSEN AUIZONA (State)	/	<i></i>
(City)	THUSEN THIZONA	855 (7in)	7
(City)	(Sate)	(2.10)	
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include A	rea Code)
Email Address			
Email Address	NAGEMENT INFORMATIO	<u>N</u>	-
MA		<del></del> -	ER
MA		<del></del> -	
MA		<del></del> -	
MA	(Name)  PAYSON, TARIZONA (City)	<del></del> -	(Zip)
MA		EW M (Title) 853 (State)	(Zip)
MAI  Management Contact:   ### ### ### #######################	(Name)  PAYSON, TARIZONA (City)	<del></del> -	(Zip)
MAI  Management Contact:   #C 6 B x 1048L  (Street)  908-474-1766	Acyf. TARKER (Name) TAYSOM, ARIZOMA (City) 928-474-7812	EW M (Title) 853 (State)	(Zip)
MAI  Management Contact:  #C. 6 B x 1048 L  (Street)  908-474-17 la lo  Telephone No. (Include Area Code)  Email Address	(Name)	EW M (Title) 853 (State)	(Zip)
Management Contact:   ### AC. 6 Park 104 & L (Street)  908-474-17 & 6  Telephone No. (Include Area Code)  Email Address  On Site Manager:	(Name)	(Title)  855 (State)  Cell No: (Include A	(Zip)
MAI  Management Contact:  ### A Contact:  #### A Contact:  ##### A Contact:  ##### A Contact:  ###################################	Acyf. TARKER (Name) TAYSOM, ARIZOMA (City) 928-474-7812	(Title)  853 (State)  Cell No: (Include A	(Zip) rea Code)
MAI  Management Contact:  #C. & B. x. 1048 L  (Street)  928-474-17 & 6  Telephone No. (Include Area Code)  Email Address.	(Name)	(Title)  855 (State)  Cell No: (Include A	(Zip)
Management Contact:  #CGBK1048L  (Street)  928-474-1766  Telephone No. (Include Area Code)  Email Address  On Site Manager:	(Name)  7445077, 7421201177  (City)  928-474-7812  Fax No. (Include Area Code)  (Name)  F445017  (City)  928-474-7812	(State)  (State)  (State)  Cell No: (Include A	(Zip) rea Code)  2534/ (Zip)
MAI  Management Contact:  ### A Contact:  #### A Contact:  ##### A Contact:  ##### A Contact:  ###################################	(Name)  FAYSOM, FARIZOMFA (City)  GR8-474-7812  Fax No. (Include Area Code)  Haysom (Name)  FAYSOM  (City)	(Title)  853 (State)  Cell No: (Include A	(Zip) rea Code)  2534/ (Zip)

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: X400	(Name)		• u==.			
•	· · ·	<i>a</i> .				
AC6 B+ 1048L	7A4SON (City)	### (State)	<u>8534/</u>			
(54)			(215)			
928 - 474 - 1766 Tolephone No. (Include Area Code)	928 - 474 - 78/2 Fox No. Onclude Area Code	Cell No. (Includ	- Area Code)			
Telephone No. (Include Area Code)	Fax No. (Include Alea Code	: 6x :40. (metade : 200 0000				
kttorney:	(Name)					
	(Name)					
(Street)	(City)	(State)	(Zip)			
(0)						
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Includ	e Area Code)			
mail Address						
Diago mark this hav if the abov	e address(es) have changed or a	e undated since the la	st filing.			
			J			
<u> </u>	WNERSHIP INFORMATI	<u>ON</u>				
Check the following box that applies	to your company:					
		(C) (Other than Assoc	iation/Co-op)			
Sole Proprietor (S)	E Corporation	(C) (Other man 7,000	- T			
Partnership (P)	Subchapter S C	Corporation (Z)				
Bankruptcy (B)	Association/Co	-op (A)				
Receivership (R)	Limited Liabíli	ty Сошрану				
Other (Describe)						
	COUNTIES SERVED					
Check the box below for the county/i	es in which you are certificated to	provide service:				
<u> </u>						
_ APACHE	☐ COCHISE	COCONING	c			
☐ GILA	GRAHAM	GREENLE	E			
☐ LA PAZ	MARICOPA	MOHAVE				
	☐ PIMA	☐ PINAL				
SANTA CRUZ	☐ YAVAPAI	☐ YUMA				
_ JAMIA CROZ	,	_				
□ STATEWIDE						

#### UTILITY PLANT IN SERVICE

Acet.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization	40,000	28,4€€	17,144-00
302	Franchises	-0-	1	
303	Land and Land Rights			
304	Structures and Improvements	5,000.00		5,000,00
307	Wells and Springs	75,000.00		75.000.00d
311	Pumping Equipment	10,000.00		10,000,00
320	Water Treatment Equipment	0		Ø
330	Distribution Reservoirs and Standpipes	N/17		NIA
331	Transmission and Distribution Mains	N/A		NIA
333	Services	N/A		N/A
334	Meters and Meter Installations	32,850.00		32,850,00
335	Hydrants	N/A		N/A-
336	Backflow Prevention Devices	3,000.00		3,000.00
339	Other Plant and Misc. Equipment	1,550.00		1550.00
340	Office Furniture and Equipment	1,500.00		150000
341	Transportation Equipment	42,000.00	11,610.00	30,390-00
343	Tools, Shop and Garage Equipment	8,000.00		8,000.00
344	Laboratory Equipment	14/4		N/A
345	Power Operated Equipment	n/n		NIA
346	Communication Equipment	n/n		NIA
347	Miscellaneous Equipment	-0-		Ø
348	Other Tangible Plant	-8-		<u> </u>
	TOTALS	218,900.00	34,4660	7184,43400

This amount goes on the Balance Sheet Acct. No. 108-

## CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation  Expense (1x2)
301	Organization	40,000.00		40,000.00
302	Franchises	-6		,
303	Land and Land Rights		,,	
304	Structures and Improvements	5,000.00		5000,00
307	Wells and Springs	7,500.00		7500.00
311	Pumping Equipment	10,000.00		10,000,00
320	Water Treatment Equipment	Ð		Ø
330	Distribution Reservoirs and Standpipes	N/A		NIA
331	Transmission and Distribution Mains	n/A		N/A
333	Services	n/A		NIA
334	Meters and Meter Installations	32,850.00		32,850.0
335	Hydrants	n/A		NIA
336	Backflow Prevention Devices	3,000,00		3,000.00
339	Other Plant and Misc. Equipment	1,550.00		1550.00
340	Office Furniture and Equipment	1,500.00		1500.00
341	Transportation Equipment	3,600.00		3600.00
343	Tools, Shop and Garage Equipment	8,000.00		8000.00
344	Laboratory Equipment	n/A		NM
345	Power Operated Equipment	n/A		NIA
346	Communication Equipment	17/19		NIA
347	Miscellaneous Equipment	-0		0_
348	Other Tangible Plant	0		Ø
	TOTALS	113,000.00		113.000.00

This amount goes on the Comparative Statement of Income and Expense \_ Acct. No. 403.

## **BALANCE SHEET**

Acet No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS	TEAK	
<del></del>	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 2,601.00	\$ 1898,00
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	7465.00	1167.00
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets	<u> </u>	
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 10,066.00	\$ 3,065.00
	FIXED ASSETS		6 1 6 1 1 2 1 6
101	Utility Plant in Service	\$ 193,298.00	\$ 184,434.0
103	Property Held for Future Use		<u> </u>
105	Construction Work in Progress		011116
108	Accumulated Depreciation - Utility Plant	25,602.00	34,466.00
121	Non-Utility Property		
122	Accumulated Depreciation - Non Utility	6 (2) 8 (3) 2 (2)	0.009.81.68
	TOTAL FIXED ASSETS	s 2)8,900.00	
	TOTAL ASSETS	\$ 22896600	\$ 221,965.0

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

## BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	S	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits	320.00	240.00
236	Accrued Taxes		
237.	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
241	TOTAL CURRENT LIABILITIES	\$ 320.00	\$ 240,00
- ANT	TOTAL CURRENT DISEASE		
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	S &	\$ -2
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$ -6-	\$ <del></del>
252	Advances in Aid of Construction		-
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		6 6
	TOTAL DEFERRED CREDITS	<u> </u>	S
	The same of the sa	\$	\$
_	TOTAL LIABILITIES		
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$ 1,000.00	18 1,000.00
$\frac{201}{211}$	Paid in Capital in Excess of Par Value	227. 64/0,00	0 220, 125.
215	Retained Earnings		<u> </u>
218	Proprietary Capital (Sole Props and Partnerships)		
-210	TOTAL CAPITAL	\$328,646.0	18331 192
		\$ 228,966.	men 219/8
	TOTAL LIABILITIES AND CAPITAL	\$ 227,766.	m3901 103

## COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$16 816.00	\$26,761.64
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$ 16, 816.00	\$ 26,761.64
44		/	
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 5,200.00	\$ 7237.93
610	Purchased Water		
615	Purchased Power	4,921.00	5186.93
618	Chemicals	1	
620	Repairs and Maintenance	863.00	1085.00
621	Office Supplies and Expense	2,807.00	433.07
630	Outside Services		
635	Water Testing	600,00	213.00
641	Rents		
650	Transportation Expenses	4,13500	4789.00
657	Insurance - General Liability		N
659	Insurance - Health and Life		
666	Regulatory Commission Expense - Rate Case		
675	Miscellaneous Expense	49500	
403	Depreciation Expense		
408	Taxes Other Than Income	645.00	286.86
408.11	Property Taxes		
409	Income Tax		0 22 30
	TOTAL OPERATING EXPENSES	\$ 19,666.00	\$ 19,530.79
	OPERATING INCOME/(LOSS)	\$ \ 2,850.007	\$ 7230.85
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$ -0	\$ 8
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
127	TOTAL OTHER INCOME/(EXPENSE)	\$ -0-	\$ &
	NET INCOME/(LOSS)	\$ _ 2,850.007	\$ 7230.85

COMPA	MY	NA	ME

# arroyo Water Company

## SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN	#1	LOAN #2		2 LOAN #3		LOAN #4	
Date Issued		-						
Source of Loan		_						
ACC Decision No.		y		0				
Reason for Loan		$\Delta \parallel$		1	,		<u> ,</u>	_
Dollar Amount Issued	s /		<u>s (</u>		\$		\$	- <del>-</del> -
Amount Outstanding	S		\$		\$		\$	
Date of Maturity			<u>.</u>	<u> </u>				
Interest Rate		%		%		%		%
Current Year Interest	\$		\$		\$		\$	
Current Year Principle	S		\$		\$		\$	

Meter Deposit Balance at Test Year End	\$ 
Meter Deposits Refunded During the Test Year	 

COMPANY NAME	Ovroyo Water Company
Name of System:	ADEQ Public Water System Number:

## WATER COMPANY PLANT DESCRIPTION

#### WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-805-621	5+3	90	(ai'	19"		1996
				<u></u>		
			<u> </u>		<u> </u>	<u> </u>

Arizona Department of Water Resources Identification Number

#### OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
MA		

BOOSTER PUN	MPS .	FIRE HY	DRANTS
Horsepower	Quantity	Quantity Standard	Quantity Other
3	/		
			70

STORAGE TAI	vks	PRESSUI	RE TANKS
Capacity	Quantity	Capacity	Quantit
11.000	1	2,500	
71,000			,

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	arroyo Water Company
Name of System:	ADEQ Public Water System Number:

#### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

<u> </u>	MAINS	
Size (in inches)	Material	Length (in feet)
2	PVC	2,000
3	PVC	6,200
4		
5		
6		
8		
10		
12		
	<u> </u>	

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	102
3/4	•
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	
	-

STRUCTURES:

Fence around well ste-Chain link

Other:

Operations Company procedes equipment

4 inalisals such as, back has, trenshire, generators,

other.

For the following three items, list the utility owned assets in each category for each system.

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	arrayo Water Company
Name of System:	ADEQ Public Water System Number:

#### WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2007

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	102	389.590		
FEBRUARY	102	229 580		
MARCH	102	268,870	<del></del>	
APRIL	102	509770	<u> </u>	
MAY	102	677,770		
JUNE	102	859.910		
JULY	102	1,146,870	•	
AUGUST	102	1,304,350		
SEPTEMBER	102	873.570		
OCTOBER	102	941,220		
NOVEMBER	102	822 110		
DECEMBER	102	729 180		
	TOTALS $\rightarrow$	8, 752, 790		

What is the level of arsenic for each well on your system?mg/l (If more than one well, please list each separately.)
If system has fire hydrants, what is the fire flow requirement? MA GPM forhrs
If system has chlorination treatment, does this treatment system chlorinate continuously ( ) Yes ( ) No N/A
Is the Water Utility located in an ADWR Active Management Area (AMA)?  ( ) Yes (X) No
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  ( ) Yes ( ) No
If yes, provide the GPCPD amount:

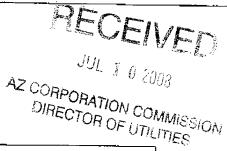
Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME Wroyd Water Company YEAR ENDING 12/31/2007

#### **PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2007 was: \$ 6.98.63
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why.

# VERIFICATION AND SWORN STATEMENT Taxes



VFD	IFIC.	<b>ል ንገ</b> ኘ	N
V L. D		/ L A L	* # * *

STATE OF

I, THE UNDERSIGNED

OF THE

<b></b>	
COUNTY OF (COUNTY NAME)	
C/LH	
NAME (OWNER OR OFFICIAL) TITLE	
Logey S. Tarker	
COMPANY NAME	
My a teleta	
arroyo Walle Co.	

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	-	YEAR
12	31		2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

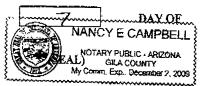
SIGNATURE OF OWNER OR OFFICIAL

928-474-1766 TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS



MONTH MARCH

.20<u>0</u>8-

SEGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 12.2.09

CCMD	ANV	NAME
COMIT.	ALV I	TATATATA

# arroyo Water Company

**YEAR ENDING 12/31/2007** 

#### **INCOME TAXES**

For this reporting period, provide the following:	
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	
State Taxable Income Reported Estimated or Actual State Tax Liability	
Amount of Grossed-Up Contributions/Advances:	
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances	

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

#### CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

PICNATION

West 7, 2008

EKER KILETARKER

TITLE

#### VERIFICATION AND SWORN STATEMENT

Intrastate Revenues Only

AECEIVED

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

VERIFICATION

STATE OF

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) GILA NAME (OWNER OR OFFICIAL) TITLE

KACY J. PARKER

COMPANY NAME

WATEK! ARROGO

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 2007 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2007 WAS:

Arizona Intrastate Cross Operating Revenues Only (5)

· 27366.00

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 1849 92 IN SALES TAXES BILLED, OR COLLECTED)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

NOTARY PUBLIC - ARIZONA GILA COUNTY My Comm. Exp.: December 2, 2009 SIGNATURE OF OWNER OR OFFICIAL

74-1766

COUNTY NAME

MY COMMISSION EXPIRES 12-2-09

16

# VERIFICATION AND

# SWORN STATEMENT RESIDENTIAL REVENUE

Intrastate Revenues Only



JUL 1 0 2002

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

VERIFICATION

STATE OF ARIZONA	ST	ATE	OF	ARIZONA
------------------	----	-----	----	---------

I. THE UNDERSIGNED

COUNTY OF (COUNTY NAME)

BIL 17

NAME (OWNER OR OFFICIAL)

KACY J. PARKER

COMPANY NAME

(DYTERS M. Ulatic Company)

OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2007 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

s 27346.00

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

928-474-1766

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

(SEAL)

NANCY E CAMPBELL

NOTARY PUBLIC - ARIZONA
GILA COUNTY
My COMM. Exp.: December 2, 2009

MY COMMISSION EXPIRES 12. 2.09

NOTARY PUBLIC NAME

COUNTY NAME

COUNTY NAME

COUNTY NAME

MONTH MUSICA

20 08

X Manny & Lamphell
SIGNATURE OF NOTARY HOBBLIC